2013-2014 Nursing Education Program Annual Report

It is now time to complete the FY 2013-2014 Nursing Education Program Annual Report as mandated by ABN Administrative Code Rule 610-X-3-.10 (1). The 2013-2014 format will allow several sections of the report to self-populate, decreasing the amount of time required to complete the report. The dean/program director has the ability to edit, delete or make additions to the sections that self-populate.

The 2013-2014 Nursing Education Program Annual Report is due to the Board by **November 30, 2014.**

DIRECTIONS

STEP ONE:

Go to the Alabama Board of Nursing website: www.abn.alabama.gov

STEP TWO:

From the top menu select **Nursing Programs** and then select **Nursing Education Program Annual Report.**

STEP THREE:

CLICK on the **2013-2014 Nursing Education Program Annual Report** link from the menu on the left hand side of the page. Enter your program code and the word "password" for your password.

STEP FOUR: Parent Institution Information (Page 1 of Report)

1) If your school has completed an Annual Report in the past, the institution information should self-populate. REVIEW the information for accuracy and make changes as appropriate.
2) NEW PROGRAMS need to complete the institution's mailing address and the requested information about the Chief Executive Officer.
3) CLICK on the appropriate classification for your institution.
4) Enter the appropriate accrediting body information for the Institution and then click the "ADD" link. If you have more than one, enter one accrediting body at a time. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
5) If probation, warning or withdrawn is selected, please cite the reason and the effective date of resolution in the free text box.
6) CLICK on the "Save" button.

7) CLICK on the "Programs>>>" button to proceed to the next section.

STEP FIVE: Programs Section (Page 2)

The information entered last year should automatically populate.

1) REVIEW the information for accuracy and make changes as appropriate.
2) If this is the first time your program is completing this report, insert the program's mailing address, phone number, and requested information for the chief nurse administrator.
3) CLICK on the appropriate specialty accreditation status for your institution.
4) Enter the appropriate specialty accrediting body information for the NURSING PROGRAM below and then click the "ADD" link. If you have more than one, enter one body at a time.
5) Please use the edit button to make changes as appropriate. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
6) CLICK on the button that reflects the type of nursing program, credit hour system, and ABN status for your institution.
7) CLICK on the "Save" button.
8) CLICK on the "<<<Institution" button to go back to the previous section or CLICK on the "Program/Site>>>" button to proceed to the next section.

STEP SIX: Program/Campus/Site Section (Page 3)

1) Enter the number of campuses/sites this institution has that offer nursing programs. CLICK the "SAVE" button to the right.
2) Enter each program campus/site including the main campus that offers this type of nursing program, the address, program coordinator, number of students, number of faculty, number of clinical supervisors, and whether the program offers day classes, evening classes, or both. *Do not count faculty/supervisors more than once.*
3) To add a program campus/site, go to the bottom of the list and enter the appropriate information and then click the ADD link.
4) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
5) Example: If you have an instructor who teaches at more than one site, count him as .5 at one site and .5 at the second site. See screen shot below:

		PROGRAM / CAMPUS SITE	LOCATION ADDRESS	COORDINATOR / PROGRAM HEAD	TOTAL NUMBER OF STUDENTS AT EACH SITE	TOTAL NUMBER OF FACULTY AT EACH SITE	TOTAL NUMBER OF CLINICAL SUPERVISORS AT EACH SITE	INDICATE DAY, EVENING OR BOTH
Edit	Delete	Blue	110	Daffy Duck	6	.5	0	Evening
Edit	Delete	Red	112	Bugs Bunny	6	.5	0	Day
	Add							○ Day ○ Evening ○ Both

6) CLICK on the "<<<Program" button to go back to the previous section or CLICK on the "Faculty>>>" button to proceed to the next section.

STEP SEVEN: Faculty (Page 4)

Campus Site information entered in the last section should self-populate

1) List faculty according to the number and/or percentage of time that they teach in each program campus/site.
2) Employees who work thirty five hours or above are considered to be full time, employees who work between twenty and thirty four hours are part time, and employees who work less than twenty hours are considered to be part time.
3) Example: If part-time (PT) on one campus/program and part time on another campus/program count accordingly (Do not count full-time (FT) on each because they are not FT at each campus). **See screen shot below. If you have a faculty who is assigned to supervise students in clinicals only, count only as faculty. Do not count as both faculty and clinical supervisor. Do not Double count when you get to Clinical supervisor/instructor section. See screen shot below.**

	SITE NAME	TOTAL NUMBER OF FACULTY	NUMBER WITH PhD	NUMBER WITH EdD	NUMBER WITH DNP	NUMBER WITH MASTERS IN NURSING	NUMBER WITH MASTERS IN RELATED AREA
Edit	Blue	(A) FT .5 (B) PT (C) PT	(A) FT .5 (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT
Edit	Red	(A) FT .5 (B) PT (C) PT	(A) FT .5 (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT

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4) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
5) CLICK on the "<<<Program/Site" button to go back to the previous section or CLICK on the "Faculty Prep>>>" button to proceed to the next section.

STEP EIGHT: Faculty Experiential Preparation (Page 5)

Campus Site information entered should self-populate

1) For each campus site, enter the number of faculty who have less than three years of **teaching** experience. If faculty member is part time enter them according to the percentage of time they work.
2) For each campus site, enter the number of faculty who have more than three years of **teaching** experience. If faculty member is part time enter them according to the percentage of time they work.
3) For each campus site, enter the number of faculty who have less than five years of **nursing practice** experience. If faculty member is part time enter them according to the percentage of time they work.
4) For each campus site, enter the number of faculty who have more than five years of **nursing practice** experience. If faculty member is part time enter them according to the percentage of time they work.
5) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
6) CLICK on the "<<<Faculty" button to go back to the previous section or CLICK on the "Clinical>>>" button to proceed to the next section.

STEP NINE: Clinical Supervisor/Instructor Information (Page 6)

Campus Site information entered in the last section should self-populate

1) List faculty according to the number and/or percentage of time that they teach in each program campus/site.
2) Employees who work thirty five hours or above are considered to be full time, employees who work between twenty and thirty four hours are part time, and employees who work less than twenty hours are considered to be part time.
3) Example: If part-time (PT) on one campus/program and part time on another campus/program count accordingly (Do not count full-time (FT) on each because they are not FT at each campus). **If you have counted an employee under the Faculty section, do not count again. See screen shot below.**

	SITE NAME	TOTAL NUMBER OF CLINICAL SUPERVISOR	NUMBER WITH PhD/EdD/DNP	NUMBER WITH MASTERS DEGREE IN RELATED FIELD	NUMBER WITH MASTERS DEGREE IN NURSING	NUMBER WITH BACHELOR DEGREE IN NURSING	NUMBER WITH ASSOCIATE DEGREE IN NURSING
Edit	Blue	(A) FT .5 (B) PT (C) PT	(A) FT .5 (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT
Edit	Red	(A) FT .5 (B) PT (C) PT	(A) FT .5 (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT	(A) FT (B) PT (C) PT

4) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
5) CLICK on the "<<<Faculty Prep" button to go back to the previous section or CLICK on the "ClinicalPrep>>>" button to proceed to the next section.

STEP TEN: Clinical Supervisor/Instructor Experiential Preparation (Page 7)

Campus Site information entered should self-populate

1) For each campus site, enter the number of clinical supervisors/Instructors who have less than three years of **teaching** experience. If the clinical supervisor/Instructor is part time enter the percentage of time each works.
2) For each campus site, enter the number of clinical supervisors/Instructors who have more than three years of **teaching** experience. If the clinical supervisor/Instructor is part time enter the percentage of time each works.
3) For each campus site, enter the number of clinical supervisors/Instructors who have less than five years of **nursing practice** experience. If the clinical supervisor/Instructor is part time enter the percentage of time each works.
4) For each campus site, enter the number of clinical supervisors/Instructors who have more than five years of **nursing practice** experience. If the clinical supervisor/Instructor is part time enter the percentage of time each works.
5) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
6) CLICK on the "<<<Clinical" button to go back to the previous section or CLICK on the "Ratio>>>" button to proceed to the next section.

STEP ELEVEN: Faculty to Student Ratios (Page 8)

Campus Site information entered should self-populate

1) For each Campus Site, enter the average faculty to student ratio in the classroom setting.
2) For each campus/site, enter the average faculty/clinical supervisor ratio in the lab setting.
3) For each campus/site, enter the average faculty/clinical supervisor ratio in the acute care setting.
4) For each campus/site, enter the average faculty/clinical supervisor ratio in the long term care setting.
5) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
6) CLICK on the "<<<ClinicalPrep" button to go back to the previous section or CLICK on the "Additional Faculty>>>" button to proceed to the next section.

STEP TWELVE: Need for Additional Faculty/Personnel (Page 9)

Campus Site information entered should self-populate

1) For each Campus Site, enter the number of additional faculty needed.
2) For each Campus Site, enter the number of additional clinical supervisors/instructors needed.
3) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
4) CLICK on the "<<<Ratio" button to go back to the previous section or CLICK on the "Barriers>>>" button to proceed to the next section.

STEP THIRTEEN: Barriers to Recruiting Faculty (Page 10)

Campus Site information entered should self-populate

1) For each Campus Site, Select all barriers that apply. Write in additional barriers under the "OTHER BARRIERS" tab.
2) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
3) CLICK on the "<<<Additional Faculty" button to go back to the previous section or CLICK on the "Enrollment>>>" button to proceed to the next section.

STEP FOURTEEN: Student Enrollment (Page 11)

Campus Site information entered should self-populate

1) For each Campus Site, enter the number of first year students enrolled. If you do not track first year students, write NA.
2) For each Campus Site, enter the number of second year students enrolled. If you do not track second year students, write NA.
3) For each Campus Site, enter the number of third year students enrolled. If you do not track third year students, write NA.
4) For each Campus Site, enter the number of fourth year students enrolled. If you do not track fourth year students, write NA.

5) Enter the total number of qualified students that you were unable to admit into the nursing program.
6) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
7) CLICK on the "<<<Barriers" button to go back to the previous section or CLICK on the "Reasons>>" button to proceed to the next section.

STEP FIFTEEN: Reasons Unable to Select Qualified Students (Page 12)

Campus Site information entered should self-populate

1) For each Campus Site, select all reasons that address why the program was unable to admit qualified students. Write in additional reasons under the "OTHER REASONS" tab.
2) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.
3) CLICK on the "<<<Enrollment" button to go back to the previous section or CLICK on the "Courses>>>" button to proceed to the next section.

STEP SIXTEEN: Courses (Page 13)

Complete the curriculum grid.

1) For each course, provide the course title, course summary, the number of credit hours, the number of clock hours, direct patient care (clinical) hours, lab (low fidelity simulation) hours, Simulation hours (high fidelity simulation hours) and observation hours. High Fidelity Simulation is defined as **s**imulation that incorporates a computerized full body manikin that can be programmed to

provide realistic physiological responses to student actions (Cant & Cooper, 2010)

2) To add a course, go to the bottom of the list and enter the appropriate information and then click the ADD link.

3) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.

4) CLICK on the "<<<Reasons" button to go back to the previous section or CLICK on the "Program Scores>>>" button to proceed to the next section.

STEP SEVENTEEN: Program Scores (Page 14)

Campus Site information entered should self-populate

1) For each campus/site, enter the number of students who wrote (took) the NCLEX ® Exam.

2) For each campus/site, enter the number of students passed the NCLEX ® Exam.

3) For each campus site, enter the graduation rate. Students who graduate within 150% of the "normal" time for their program count as graduates for the graduation rate.

4) For each campus/site, enter the job placement rate. When calculating the job placement rates, the numerator is the number of students who, within 180 days of the day they received their degree, certificate, or other recognized educational credential (in a given award year) obtained gainful employment in nursing and the denominator is the number of students who, during the award year, received the degree, certificate, or other recognized educational credential awarded for successfully completing the program.

5) If you need to change information, click the "EDIT" button on the left of the row for each campus listed and insert the appropriate information. Once the information is complete and you have verified that the edited data is correct, CLICK the "UPDATE" button to the left of the line and proceed down the table.

6) CLICK on the "<<<Courses" button to go back to the previous section or CLICK on the "Curriculum>>>" button to proceed to the next section.

STEP EIGHTEEN: Curriculum (Page 15)

1) Identify any substantive changes made in the nursing program since the last annual report in the nursing program administrator governing institution administrator, governance structure of the institution, accreditation status (program or parent institution), ownership or merger of parent institution, school name, and /or relocation.

2) Select the box next to the topic that has changed and provide appropriate information in the text box.

3) CLICK on the "<<<Program Scores" button to go back to the previous section or CLICK on the "Report Completion>>>" button to proceed to the next section.

STEP NINETEEN: Report Completion (Page 16)

1) If you **have completed** the report and are ready for the report to be transmitted to the ABN,
    a. CHECK the affirmation statements as appropriate.
    b. CHECK the "completed Annual Report:
    c. Enter the name of the individual submitting the report.
2) CLICK the "UPDATE" button to transmit to the Alabama Board of Nursing.
3) If you are **NOT finished** and need to come back later to finish the report **DO NOT** mark the "I affirm that the data is true and accurate….." Do NOT click the "UPDATE" button. Once this "UPDATE" button is clicked, you will not be able to go back and make any changes to the report without calling the ABN to re-open your Program's data.

For questions about the Annual Report, contact Catherine Russell by email at Catherine.russell@abn.alabama.gov or by phone at 334/293-5235.

For technical assistance with completing the report and to re-open your report, contact Richard Boyette by email at Richard.Boyette@abn.alabama.gov or by phone at 334/293-5200.